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TO: Commissioner for Patents
FAX NO.: 571-273-8300
FROM: Kin-Wah Tong
DATE: March 21, 2006
MATTER: Serial No. 09/772,360 Filed: January 30, 2001
DOCKET NO.: ATT/2000-0660
APPLICANT: CHEN, et al.

The following has been received in the U.S. Patent and Trademark Office on the date of this facsimile:

☐ Petition
☐ Disclosure Statement & PTO-1449
☐ Priority Document
☐ Drawings (sheets) informal
☒ Appeal Brief
☒ Petition of Extension of Time (2 COPIES)

☒ Transmittal Form
☒ Fee Transmittal
☒ Deposit Account Transaction
☒ Facsimile Transmission Certificate
dated March 21, 2006
☐ Terminal Disclaimer

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PTO/SB/21 (09-04)

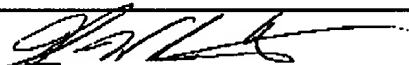
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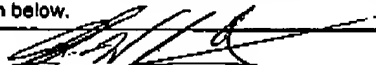
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/772,360
	Filing Date	January 30, 2001
	First Named Inventor	CHASE, et al.
	Art Unit	2667
	Examiner Name	Murphy, Rhonda L.
Total Number of Pages in This Submission	Attorney Docket Number	ATT/2000-0660

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Facsimile Transmission
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Patterson & Sheridan, LLP		
Signature			
Printed Name	Kin-Wah Tong		
Date	March 21, 2006	Reg. No.	39,400

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Typed or printed name	Kin-Wah Tong	Date	March 21, 2006

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003/015

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PTO/SB/17 (12-04v2)

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<p><i>Effective on 12/08/2004.</i> <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i></p> <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2005</h3>		<p><i>Complete if Known</i></p>	
		Application Number	09/772,360
		Filing Date	January 30, 2001
		First Named Inventor	CHASE, et al.
		Examiner Name	Murphy, Rhonda L.
		Art Unit	2867
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	ATT/2000-0660
TOTAL AMOUNT OF PAYMENT		(\$) \$500.00	

METHOD OF PAYMENT (check all that apply)

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 Deposit Account Number: 20-0782
 Deposit Account Name: Patterson & Sheridan LLP

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Under 37 CFR 1.16 and 1.17

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Small Entity Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims Extra Claims Fee (\$) Fee Paid (\$)

_____ -20 or HP= _____ x _____ = _____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)

_____ -3 or HP= _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	_____	_____ / 50 = _____ (round up to a whole number) x _____	_____	_____

4. OTHER FEE(S)

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	_____
Other (e.g., late filing surcharge) : Appeal Brief	500.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	39,400	Telephone	(732) 530-8404
Name (Print/Type)	Kin-Wah Tang	Date	March 21, 2006		

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